

## ILI Intervention Report Form (Part 1)

### Section A:

Name of Contracting Agency:

Intervention Name:

|   |   |
|---|---|
| Primary risk population (check only one):<br><input type="checkbox"/> MSM<br><input type="checkbox"/> MSM/IDU<br><input type="checkbox"/> IDU<br><input type="checkbox"/> Heterosexual<br><input type="checkbox"/> Mother with/at risk for HIV<br><input type="checkbox"/> General public | Secondary risk population (check only one):<br><input type="checkbox"/> MSM<br><input type="checkbox"/> MSM/IDU<br><input type="checkbox"/> IDU<br><input type="checkbox"/> Heterosexual<br><input type="checkbox"/> Mother with/at risk for HIV<br><input type="checkbox"/> General public |
|---|---|

|  |  |  |
|--|--|--|
| Location where intervention provided:<br><input type="checkbox"/> Community-Based organization<br><input type="checkbox"/> Community setting<br><input type="checkbox"/> Clinic-Health care facility | <input type="checkbox"/> HIV counseling & testing site<br><input type="checkbox"/> Social service agency<br><input type="checkbox"/> Drug tmt facility | <input type="checkbox"/> Correction /Detention center<br><input type="checkbox"/> School/Educational facility<br><input type="checkbox"/> Other (specify): |
|--|--|--|

### Section B: Intervention Summary

| Clients served:                     | Male  | Female           | Transgender | Unknown      | Total |
|-------------------------------------|---|------------------|-------------|--------------|-------|
| American Indian/Alaska Native       |   |                  |             |              |       |
| Native Hawaiian or Pacific Islander |   |                  |             |              |       |
| White                               |   |                  |             |              |       |
| African American                    |   |                  |             |              |       |
| Asian                               |   |                  |             |              |       |
| Race Unknown                        |   |                  |             |              |       |
| More than one race                  |   |                  |             |              |       |
| <b>Total</b>                        |   |                  |             |              |       |
| Hispanic                            |   |                  |             |              |       |
| Non-Hispanic                        |   |                  |             |              |       |
| Ethnicity Unknown                   |   |                  |             |              |       |
|                                     | Number of clients receiving                             |                  |             |              |       |
|                                     | Only 1 session:   | Only 2 sessions: | 3 or more:  | <b>Total</b> |       |
| HIV -infected clients               |   |                  |             |              |       |
| High-risk HIV -negative             |   |                  |             |              |       |
| Unknown serostatus                  |   |                  |             |              |       |
| <b>Total</b>                        |   |                  |             |              |       |
| <b>Total sessions received</b>      | i.e., sum of number of sessions received by each client |                  |             |              |       |